



Express Mail Label No: EL928104022US

Date of Deposit: December 19, 2003

#8

Atty. Docket No.: 7032/1002

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Steven Mentzer  
Serial No.: 09/819,939  
Filed: March 28, 2001  
Entitled: Molecular Database for Antibody Characterization

Examiner: Leroux, E. P.  
Group Art Unit: 2171  
Conf. No.: 2967

**CERTIFICATE OF MAILING UNDER 37 CFR 1.10**

I hereby certify that the paper (and any paper or fee referred to as being enclosed) is being deposited with the United States Postal Service using Express Mail to Addressee Service, under 37 C.F.R. Section 1.10, Express Mail Label No. EL928104022US on this date, December 19, 2003, postage prepaid, in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Kathleen M. Williams

Name of Person Mailing Paper

Signature of Person Mailing Paper

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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JAN 05 2004

Technology Center 2100

**AMENDMENT TRANSMITTAL LETTER**

Sir:

1. Transmitted herewith is an amendment in response to the Office Action mailed on June 19, 2003, in the above-referenced patent application.

**STATUS**

2. Applicant is

a small entity.  
 other than small entity.

**EXTENSION OF TIME**

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

Applicant petitions for an extension of time under 37 CFR 1.136

<u>Extension (months)</u>	<u>Fee for other than small entity</u>	<u>Fee for small entity</u>
<input type="checkbox"/> ONE month	\$110.00	\$55.00
<input type="checkbox"/> TWO months	\$420.00	\$210.00
<input checked="" type="checkbox"/> THREE months	\$950.00	\$475.00

<input type="checkbox"/>	FOUR months	\$1,480.00	\$740.00
<input type="checkbox"/>	FIVE months	\$2,010.00	\$1,005.00
		Fee	<u>\$475.00</u>

### FEE FOR CLAIMS

4. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

CLAIMS AS AMENDED						
	(1)	(2)	(3)			
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA	RATE	FEE
TOTAL CLAIMS	22	minus	20	2	x \$18	\$36.00
INDEPENDENT CLAIMS	5	minus	5	0	x \$84	0.00
MULTIPLE DEPENDENT CLAIM ADDED	NO				\$280	0.00
					<b>TOTAL</b>	<b>\$36.00</b>
If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2 and enter amount here.				<b>SMALL ENTITY TOTAL</b>		<b>\$18.00</b>

(c)  No additional fee for claims is required.

OR

(d)  Total additional fee for claims required \$18.00

### FEE PAYMENT

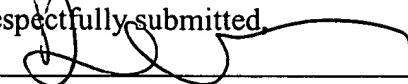
5.  Attached is a check in the sum of \$493.00

Charge Deposit Account No. 16-0085, Reference No. 7032/1002 any additional necessary fees.

Charge the amount of \$ \_\_\_\_\_ to Deposit Account No. 16-0085, Reference No. \_\_\_\_\_ and any additional necessary fees. A duplicate of this transmittal is attached.

Date: December 19, 2003

Respectfully submitted,

  
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